PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE O			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			68					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			Cominus 20=		. 46			X\$ 9=	•	OR	X\$18=	
INDEPENDENT CLAIMS			4 minus 3 =				Ī	X40=		OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=	•
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II							· :	IOIAL		Join	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
	independent		Minus	***	٠ . :	=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							405			070	1 12
								+135=	. *	OR	+270=	
							A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	· 1 _					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	! [X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
											TOTAL	
		P	TOTAL ADDIT. FEE		OR	ADDIT. FEE						
_	,	(Column 1) CLAIMS			mn 2) IEST	(Column 3)	1 <u>.</u>					
AMENDMENT C		REMAINING AFTER AMENDMENT	:	NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	/
ME	Independent	*	Minus	***		=		X40=		0.0	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		J ├			OR	7.55-	
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
"* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er fou	nd in the app	ropriate box	in col	umn 1.	